

Figure 1

PAT.NO	A INITIALS	B	C	D	E	F	G	H	I	J	Smoking
				fe=0	ma=1						
1	2	Date:	12/8/01	VISIT	GENDER	Date of Birth	Blood Pressure	Cups/day			
							sbp	dbp			
3	2	E.B.B	12/2/99	0	2/27/42	183	98	6	6	NO	NO
4	2	E.B.B	1/4/00	0	2/27/42	170	92	6	6	NO	NO
5	2	E.B.B	1/6/00	0	2/27/42	162	89	6	6	NO	NO
6	2	E.B.B	1/20/00	0	2/27/42	138	81	6	6	NO	NO
7	2	E.B.B	2/3/00	0	2/27/42	120	80	6	6	NO	NO
8	4	B.B	12/14/99	1	7/27/66	144	90	NO	NO	NO	NO
9	4	B.B	7/28/01	1	7/27/66	118	76	NO	NO	NO	NO
10	5	E.S	12/16/99	0	6/15/61	128	79	4	4	YES	YES
11	5	E.S	1/6/00	0	6/15/61	120	77	4	4	YES	YES
12	7	B.S.H	12/9/99	0	10/29/22	155	101	8	8	NO	NO
13	7	B.S.H	7/14/01	0	10/29/22	127	92	8	8	NO	NO
14	7	B.S.H	10/7/01	0	10/29/22	126	84	8	8	NO	NO
15	9	E.H	1/12/99	0	11/30/27	168	98	10	10	YES	YES
16	9	E.H	1/10/00	0	11/30/27	149	90	10	10	YES	YES
17	9	E.H	2/14/00	0	11/30/27	144	87	6	6	YES	YES
18	9	E.H	3/28/00	0	11/30/27	145	89	6	6	YES	YES
19	9	E.H	4/5/00	0	11/30/27	142	86	6	6	YES	YES
20	9	E.H	5/3/00	0	11/30/27	134	81	6	6	YES	YES
21	9	E.H	2/22/01	0	11/30/27	122	80	6	6	YES	YES
22	10	T.J	12/21/99	0	10/15/50	156	84	7	7	YES	YES
23	10	T.J	1/20/00	0	10/15/50	140	78	5	5	YES	YES
24	10	T.J	1/24/00	0	10/15/50	138	77	5	5	YES	YES
25	10	T.J	1/26/00	0	10/15/50	138	78	5	5	YES	YES
26	10	T.J	2/15/00	0	10/15/50	122	77	5	5	YES	YES
27	10	T.J	2/24/00	0	10/15/50	120	78	5	5	NO	NO
28	11	A.K	12/2/99	0	3/31/75	144	88	6	6	NO	NO
29	11	A.K	12/14/99	0	3/31/75	120	80	6	6	NO	NO

Figure 1 (Cont.)

A		B		C		D		E		F		G		H		I		J	
PAT.NO	INITIALS	DATE OF		GENDER		Date of Birth		fe=0		ma=1		Blood Pressure		dbp		Cups/day		Coffee cons.	
1	2	Date:		VISIT								sbp		dbp					
30		12	J.A.K.	11/25/99		1	12/12/57		117		74		3	YES					
31		12	J.A.K.	12/17/99		1	12/12/57		120		79		3	YES					
32		13	B.O.K	12/21/99		1	10/2/47		198		113		7	YES					
33		13	B.O.K	1/11/00		1	10/2/47		164		99		7	YES					
34		13	B.O.K	1/20/00		1	10/2/47		157		98		7	YES					
35		13	B.O.K	2/1/00		1	10/2/47		143		90		7	YES					
36		13	B.O.K	2/8/00		1	10/2/47		129		82		7	YES					
37		16	J.H.L	12/15/99		1	6/27/59		170		90		4	NO					
38		16	J.H.L	1/6/00		1	6/27/59		120		80		4	NO					
39		16	J.H.L	2/3/00		1	6/27/59		127		83		4	NO					
40		16	J.H.L	5/25/00		1	6/27/59		121		80		4	NO					
41		17	I.M	12/7/99		1	11/3/46		139		89		8	NO					
42		17	I.M	12/10/99		1	11/3/46		128		82		8	NO					
43		18	R.M.S.	12/7/99	0		4/17/46					5	YES						
44		18	R.M.S.	12/14/99	0		4/17/46					5	YES						
45		18	R.M.S.	1/6/00	0		4/17/46					5	YES						
46		18	R.M.S.	1/20/00	0		4/17/46					5	YES						
47		18	R.M.S.	2/10/00	0		4/17/46					5	YES						
48		18	R.M.S.	3/14/00	0		4/17/46					5	YES						
49		19	W.N	12/2/99	0		3/7/56					4	NO						
50		19	W.N	1/6/00	0		3/7/56					4	NO						
51		19	W.N	3/13/00	0		3/7/56					4	NO						
52		21	B.S.P	12/9/99	0		7/16/51					7	NO						
53		21	B.S.P	12/29/99	0		7/16/51					7	NO						
54		21	B.S.P	1/29/00	0		7/16/51					7	NO						
55		21	B.S.P	2/17/00	0		7/16/51					7	NO						
56		21	B.S.P	6/8/00	0		7/16/51					7	NO						

Figure 1 (Cont.)

1	2	PAT.NO	INITIALS	DATE OF VISIT	GENDER	DATE OF Birth	Blood Pressure	Cups/day	Coffee cons.	Smoking	J
					fe=0	ma=1	sbp	dbp			
57	21	B.S.P		7/14/00	0	7/16/51	118	77	7	NO	
58	21	B.S.P		10/7/01	0	7/16/51	119	80	7	NO	
59	23	R.S.P.H	0912.99	0		5/7/76			NO	NO	
60	23	R.S.P.H	12/20/99	0		5/7/76					
61	23	R.S.P.H	2/17/00	0		5/7/76					
62	24	R.P	12/2/99	1		7/22/15	197	123	4	NO	
63	24	R.P	12/8/99	1		7/22/15	183	120	4	NO	
64	24	R.P	1/6/00	1		7/22/15	172	118	4	NO	
65	24	R.P	1/25/00	1		7/22/15	169	110	4	NO	
66	24	R.P	2/2/00	1		7/22/15	158	98	4	NO	
67	27	R.R	12/15/99	0		4/22/40			8	NO	
68	27	R.R	12/20/99	0		4/22/40	144	99	6	YES	
69	27	R.R	1/4/00	0		4/22/40	138	89	6	YES	
70	27	R.R	1/19/00	0		4/22/40	130	81	6	YES	
71	27	R.R.	2/3/00	0		4/22/40	123	80	6	YES	
72	27	R.R	2/23/00	0		4/22/40	122	80	6	YES	
73	27	.R.R	3/9/00	0		4/22/40	123	81	6	YES	
74	27	R.R	4/10/00	0		4/22/40	123	80	6	YES	
75	28	H.S	12/1/99	0		7/22/56			4	NO	
76	28	H.S	12/8/99	0		22-Jul	137	86	4	NO	
77	28	H.S	12/20/99	0		7/22/56	123	79	4	NO	
78	28	H.S	1/5/00	0		7/22/56	124	80	4	NO	
79	28	H.S	1/11/00	0		7/22/56	118	76	4	NO	
80	28	H.S	1/20/00	0		7/22/56			4	NO	
81	28	H.S	2/3/00	0		7/22/56			4	no	
82	28	H.S	2/17/00	0		7/22/56	120	78	4	NO	
83	28	H.S	3/6/00	0		7/22/56	119	79	4	NO	

Figure 1 (Cont.)

Figure 1 (Cont.)

PAT.NO	K Day	L Cigarettes/ cons. Units week	M Alcohol last 6. Months	N Sick leave being	O General well problem	P Diagnostic	Q only medis	R medis comb own. Med
1	2	5	0	HEADACHE	CHEST PAIN.	4.PER DAY	NO	
2	2	5	0	BETTER	BETTER	3.PER DAY	NO	
3	2	6	0	BETTER	BETTER	3.PER DAY	NO	
4	2	6	0	BETTER	BETTER	3.PER DAY	NO	
5	2	5	0	BETTER	BETTER	3.PER DAY	NO	
6	2	5	0	DIARRHOEA	OK	3.PER DAY	NO	
7	2	5	0	STRESSED	FLANK PAIN	4.PER DAY	NO	
8	4	NO	NO	0 OK	OK	2.PER DAY	NO	
9	4	NO	NO	0 L.ENERGI	GASTRITIS	4.PER DAY	YES	
10	5	10	3	0 OK	OK	2.PER DAY	YES	
11	5	10	3	0 OK	OK	4.PER DAY	YES	
12	7	NO	NO	0 L.ENERGI	LUMBAGO	4.PER DAY	NO	
13	7	NO	NO	0 OK	BETTER	2.PER DAY	NO	
14	7	NO	NO	0 OK	BETTER	2.PER DAY	NO	
15	9	20	8	0 L.ENERGI	PAIN	3.PER DAY	YES	
16	9	20	8	0 BETTER	PAIN	3.PER DAY	YES	
17	9	10	8	0 BETTER	MORE PAIN	4.PER DAY	NO	
18	9	10	8	0 BETTER	BETTER	4.PER DAY	NO	
19	9	10	8	0 BETTER	BETTER	3.PER DAY	NO	
20	9	10	8	0 OK	OK	2.PER DAY	NO	
21	9	10	8	0 L.ENERGI	ASTHMA	4.PER DAY	YES	
22	10	20	10	0 BETTER	ASTHMA	4.PER DAY	YES	
23	10	15	8	0 BETTER	BETTER	3.PER DAY	NO	
24	10	15	8	0 BETTER	SAME	2.PER DAY	NO	
25	10	15	8	0 BETTER	BETTER	3.PER DAY	NO	
26	10	15	8	0 OK	BETTER	2.PER DAY	NO	
27	10	15	8	0 OK	BETTER	3.PER DAY	NO	
28	11	4	14	14 L.ENERGI	PS-STRESS	4.PER DAY	NO	
29	11	4	14	14 BETTER	BETTER	3.PER DAY	NO	

Figure 1 (Cont.)

PAT.NO	K Day	L Cigarettes/ cons. Units week	M Alcohol cons. Units last 6. Months	N Sick leave being	O General well	P Diagnostic problem	Q only medis	R medis comb own. Med
1	2	3	4	5	6	7	8	9
30	12	12	12	8	6 L.ENERGI 6 BETTER	PAIN OK	3.PER DAY 2.PER DAY	YES NO
31	12	12	12	8	24 L.ENERGI	KIDNEY	4.PER DAY	YES
32	13	20	10	10	24 BETTER	KIDNEY	4.PER DAY	YES
33	13	20	10	10	24 BETTER	BETTER	4.PER DAY	YES
34	13	20	10	10	24 BETTER	BETTER	3.PER DAY	NO
35	13	20	10	10	24 OK	OK	2.PER DAY	NO
36	13	20	5	0	0 CHEST PAIN	palpitation	4.PER DAY	NO
37	16	5	5	0	0 BETTER	BETTER	3.PER DAY	NO
38	16	5	5	0	0 BETTER	BETTER	2.PER DAY	NO
39	16	5	0	0	0 OK	OK	2.PER DAY	NO
40	16	5	0	0	0 L.ENERGI	angina pect.	3.PER DAY	YES
41	17	NO	0	0	0 BETTER	?	3.PER DAY	YES
42	17	NO	0	0	0 BETTER	PSYKISKE	4.PER DAY	NO
43	18	10	3	0	0 L.ENERGI	PSYKISKE	4 PER DAY	NO
44	18	10	3	0	0 L.ENERGI	PSYKISKE	4 PER DAY	NO
45	18	10	3	0	0 BETTER	PSYKISKE	4 PER DAY	NO
46	18	10	3	0	0 much better	BETTER	4.PER DAY	NO
47	18	10	3	0	0 BETTER	BETTER	4.PER DAY	NO
48	18	10	3	0	0 OK	OK	2.PER DAY	NO
49	19	2	0	0	0 L.ENERGI	back pain	4.PER DAY	YES
50	19	2	0	0	0 BETTER	BETTER	4.PER DAY	YES
51	19	2	0	0	0 OK	OK	2.PER DAY	YES
52	21	4	0	0	0 L.ENERGI	HEADACHE	4.PER DAY	YES
53	21	4	0	0	0 BETTER	HEADACHE	4.PER DAY	YES
54	21	4	0	0	0 BETTER	BETTER	4.PER DAY	YES
55	21	4	0	0	0 BETTER	BETTER	4.PER DAY	NO
56	21	4	0	0	0 OK	OK	2.PER DAY	NO

Figure 1 (Cont.)

K PAT.NO	L Cigarettes/ cons. Units	M Alcohol week	N Sick leave last 6. Months	O being problem	P Diagnostic	Q only medis	R medis comb own. Med
1 2							
2 57	21	4	0	OK	OK	2.PER DAY	NO
58	21	5	0	OK	OK	2.PER DAY	NO
59	23	8	6	L.ENERGI	TINNITUS	4.PER DAY	NO
60	23	8	6	BETTER	TINNITUS	4.PER DAY	NO
61	23	8	6	OK	BETTER	3.PER DAY	NO
62	24	3	0	headache	GASTRITIS	4.PER DAY	yes
63	24	3	0	HEADACHE	better	4.PER DAY	YES
64	24	3	0	BETTER	OK	3.PER DAY	YES
65	24	3	0	OK	OK	3.PER DAY	YES
66	24	3	0	OK	OK	3.PER DAY	YES
67	27	6	14	L.ENERGI	back pain	4.PER DAY	YES
68	27	15	4	14 L.ENERGI	back pain	4.PER DAY	YES
69	27	15	4	14 BETTER	BETTER	4.PER DAY	YES
70	27	15	4	14 BETTER	BETTER	3.PER DAY	YES
71	27	15	4	14 BETTER	BETTER	3.PER DAY	YES
72	27	15	4	14 OK	OK	3.PER DAY	YES
73	27	15	4	14 OK	OK	2.PER DAY	NO
74	27	15	4	14 OK	OK	2.PER DAY	NO
75	28	6	0	L.ENERGI	palpitation	3.PER DAY	yes
76	28	6	0	L.ENERGI	palpitation	4.PER DAY	YES
77	28	6	0	L.ENERGI	BETTER	4.PER DAY	YES
78	28	6	0	L.ENERGI	palpitation	6.PER DAY	NO
79	28	6	0	L.ENERGI	palpitation	6.PER DAY	NO
80	28	6	0	OK	palpitation	3 per day	no
81	28	6	0	better	better	3 per day	NO
82	28	6	0	BETTER	BETTER	3 per day	NO
83	28	6	0	BETTER	BETTER	3 per day	NO

Figure 1 (Cont.)

K		L	M	N	O	P	Q	R
PAT.NO	Cigarettes/ cons. Units	Alcohol	Sick leave	General well	Diagnostic	only medis	medis comb own. Med	
1	Day	week	last 6. Months	being	problem			
2								
84	28		6	0 BETTER	BETTER	3 per day	NO	
85	28		6	0 BETTER	BETTER	2.PER DAY	NO	
86	28		6	0 OK	OK	2.PER DAY	NO	
87	28		6	0 OK	OK	2.PER DAY	NO	
88	40		NO	0 LENERGI	DIARRHOEA	3 per day		
89	40		NO	0 LENERGI	BETTER	4.PER DAY		
90	40		NO	0 BETTER	BETTER	4.PER DAY		
91	40		NO	0 OK	OK	3 per day		
92	42	15	7	14 LENERGI	palpation	4.PER DAY	magnesit	
93	42	15	7	14 LENERGI	palpation	5.PER DAY	no	
94	42	15	7	14 better	better	4.PER DAY	no	
95	42	15	7	14 better	better	4.PER DAY	no	
96	42	15	7	14 ok	ok	3 per day	no	
97	42	15	7	0 ok	ok	2.PER DAY	no	
98	42	15	7	0 ok	ok	2.PER DAY	no	

Figure 1 (Cont.)

S	T	U
PAT.NO	medis comb	medis comb
1		
2	2	
3	2 1.MAGNESIUM	
4	2	
5	2	
6	2 1.MAGNESIUM	
7	2	
8	4 1MAGNESIUM	MORE CLEAN WATER
9	4 NO	YES
10	5	YES
11	5	YES
12	7 1.MAGNESIUM	YES
13	7 NO	YES
14	7 NO	YES
15	9 1.MAGNESIUM	YES
16	9 1.MAGNESIUM	YES
17	9 NO	YES
18	9 NO	YES
19	9 NO	YES
20	9 NO	YES
21	9 NO	YES
22	10 NO	YES
23	10 NO	YES
24	10 NO	YES
25	10 1.MAGNESIUM	YES
26	10 NO	YES
27	10 NO	YES
28	11 NO	YES ₁
29	11 NO	YES

Figure 1 (Cont.)

S	T	U
PAT.NO	medis comb	medis comb
1		
2	12 AKUPUNKTUR	YES
30	12 NO	YES
31	13 AKUPUNKTUR	YES
32	13 1.MAGNESIUM	YES
33	13 MAGNESIUM+AKUPUNKTUR	YES
34	13 AKUPUNKTUR	YES
35	13 NO	YES
36	16 1.MAGNESIUM	YES
37	16 NO	YES
38	16 NO	YES
39	16 NO	YES
40	16 NO	YES
41	17 AKUPUNKTUR	YES
42	17 NO	YES
43	18 NO	YES
44	18 LYMPHATIC DRAIN	YES
45	18 NO	YES
46	18 NO	YES
47	18 NO	YES
48	18 NO	YES
49	19 AKUPUNKTUR	YES
50	19 NO	YES
51	19 NO	YES
52	21 AKUPUNKTUR	
53	21 NO	
54	21 AKUPUNKTUR	YES
55	21 NO	YES
56	21 NO	YES

Figure 1 (Cont.)

S	PAT.NO	medis comb	medis comb
1			
2			
57	21	NO	YES
58	21	NO	YES
59	23	NO	YES
60	23	AKUPUNKTUR	YES
61	23	NO	YES
62	24	1.MAGNESIUM	YES
63	24	1.MAGNESIUM	YES
64	24	NO	YES
65	24	NO	YES
66	24	NO	YES
67	27	AKUPUNKTUR	YES
68	27	AKUPUNKTUR	YES
69	27	AKUPUNKTUR	YES
70	27	NO	YES
71	27	NO	YES
72	27	NO	YES
73	27	NO	YES
74	27	NO	YES
75	28	AKUPUNKTUR	yes
76	28	NO	YES
77	28	AKUPUNKTUR	YES
78	28	NO	YES
79	28	NO	YES
80	28	AKUPUNKTUR	yes
81	28	NO	YES
82	28	NO	YES
83	28	NO	YES

Figure 1 (Cont.)

S	T	U
PAT.NO	medis comb	medis comb
1		
2	28 NO	YES
84	28 NO	YES
85	28 NO	YES
86	28 NO	YES
87	28 NO	YES
88	40	CLEAN WATER
89	40	YES
90	40	YES
91	40	YES
92	42 akupunktur	yes
93	42 no	yes
94	42 no	yes
95	42 no	yes
96	42 no	yes
97	42 no	yes
98	42 no	yes